SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: AMMAR CAMPA-NAJJAR Page 2 of 8

Examples Smort School ASC Hoope Fund * **PRANTATOJES, UC **	5P. Elf	For beint and other cash accounts, total the amount in all interest-bearing accounts, if the total is own 55,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For nextal and other real properly held for investment, provide a complete address or description, e.g., "rental properly," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business. The nature of its activities, and its geographic localion in Block A. Exclude: Your personal residence, including second homes and vacabon homes (unless there was rental income during the reporting period) and any financial interest in, or income dening the Philh Samings Plann in your report a privately-traded from, a lederal reliement program, including the Thirth Samings Plann if you report a privately-traded fund that is an Excepted investment Fund, please check the "EIF box. If you so choose, you may indicate that an asset or income source is that of your spoces (SP) or dependent critic (DC), or jointly had with anyone (JT), in the opportal column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	and development area and address of an element.	(do not use only doker symbols) For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that expends the reporting thresholds.	Identify (a) each asset held for invostment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in 'unearned income during the year.	Assets and/or income Sources	BLOCK A
X manager	*	\$15.001-\$50,000 \$50.001-\$100,000 \$100,001-\$250,000 \$250.001-\$100,000 \$500.001-\$1.000,000 \$1.000,001-\$25.000,000 \$5.000,001-\$25.000,000 \$5.000,001-\$25.000,000 \$0.001-\$100,000 \$0.001-\$100,0000 \$0.001-\$100,0000 \$0.001-\$100,0000 \$0.001-\$100,0000 \$0.001-\$100,0000 \$0.001-\$100,0000 \$0.001-\$100,0000		child in which you have no interest.	indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, pleass specify the method used. If an asset was sold during the reporting period and is included only because it generated moome, the value should be "None." Course M is for assets held by your spouse or dependent.	Value of Asset	BLOCK B
Princesu income	×	Spoure/DC Asset over \$1,000,000" NOME DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify, e.g., Partnership Income or Farm Income)		during t	Chock all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the Tax-Deferred column. Dividence, the Tax-Deferred column. Dividence, and capital gains, even if interested, must be disclosed as income for assets held in baxable accounts. Check the property of the p	Type of Income	BLOCK C
××	×	None - \$1,5200 □ \$201-\$1,000 □ \$1,001-\$2,500 ≥ \$2,501-\$3,000 ≤ \$5,001-\$15,000 ≤ \$15,001-\$50,000 ≤ \$50,001-\$100,000 ≥ \$100,001-\$1,000,000 ≥ \$100,001-\$5,000,000 ≥ \$50,000-\$00,000 ≥ \$50,000-\$00,000 ≥	Current Year		For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column assets indicate the category of income by checking the appropriate box below. Dividends, capital gains, even if reinvested, must be disclosed as income for assets held in taxat Check "None" if no income was earned or generated "Column XII is for assets held by your spouse or dependent child in which you have no interest	Amount of Income	вгоск о
××	*	None None	Preceding Year	The state of the s	Auch you checked "Tax-Deterned" in Block C, you may check the "None" column. For all other the category of income by checking the appropriate box below. Dividends, inferrest, and even if reinvested, must be disclosed as income for assets held in taxable accounts. Ino income was earned or generated for income was earned or generated for assers held by your spouse or dependent child in which you have no interest.	fincome	X

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					 AND THE PROPERTY OF THE PROPER						ASSET NAME	BLOCK A Assets and/or income Sources
_											EVF	
								F	-			None None
			-	description of the second section of the sec								\$5,000,001-\$25,000,000
		- -	+							-		REMI INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Incurre (Specify, e.g., Partnership Income or Farm Income)
												\$1.5200 = \$201-\$1,000
												\$100,001-\$1,000,000 R \$1,000,001-\$5,000,000 X Over \$3,000,000 X Spause DC Income over \$1,000,000' X None
												\$1.5700
												\$50,001-\$100,000 \$\frac{1}{2}\$ \$\frac{1}{2}\$\$ \$\$100,001-\$1,000,000 \$\times\$\$ \$\$1,000,001-\$5,000,000 \$\times\$\$ Over \$\$5,000,000 \$\times\$\$ \$\$Spouse/DC Income over \$1,000,000' \$\times\$\$

Name: AMMITE CAMPA-NATIME

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE C - EARNED INCOME

Name: France CANDA-NASTAR Page_ 9 ∞

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

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noting the date of receipt for honoraria)	Type		Amount
Source (include date of lecelprior notionalia)	. ypc	Current Year to Filing	Preceoing tear
ARC Trade Association Rathmone MIT (July 15)	Honoranum	SO	\$500
_	Salary	\$20,000	\$76,000
Examples: Only War Roundtable (Oct. 2)	Spouse Speech	SO NiA	\$1,000 N/A
Ontario County Board of Education	Spouse Seasy	T TO THE REAL PROPERTY OF THE PARTY OF THE P	
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SCHEDULE D - LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

							>	Amount of Liability	of Liz	ability				
-				>	ro:	c	٥	Fe .	'n	6	a	-	٠.	*
S.P.	Creditor	Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
Ехатре	First Bank of Wilmington, DE	86/5	Mongage on Rantal Property, Dover, DE				×							1
	7													1
	And the second s						 							

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternat, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

	(
Municipal Member Owner ACN Strategies, LLC	Munaging Member Owner
Name of Organization	Position
Delical the Chrefit Calethan year. First-year cambrages and non embrayees report pressure in the second research of the chrefit of the chreft of the chrefit of the chreft of the chrefit	period and the current calendar year. First-year carrindar

SCHEDULE F - AGREEMENTS

Name: FIRMAR CAMPA- NAJJARZ Page_ 6 8

Identify the da continuation o employer.	ate, parties to, and general terms of any agreement or arrangement that you hor deferral of payments by a former or current employer other than the U.S. go	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment: a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government: or continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement
	N.	

SCHEDULE J -- COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

government ar	nd any impermation considered confiderate as a resolution of	government and any fation considered continuental as a result of a privilegent present processing recognition of the
	Source (Name and City/State)	Brief Description of Duties
Ехитріе:	Doe Jones & Smith, Homelown, Homestate	Accounting Services
Cha	Mamber of Commercial	Consulting services
7	TAB San Disan CA	consulting services

FILER NOTES (Optional)

Name: Annan CAMPA-NA-TIPAL Page 7 of 8

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